



UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney/ Docket No.		2557-000191/US
First Inventor		Hoi-Jin LEE
Title	SEMICONDUCTOR DEVICE WITH SPEED BINNING TEST CIRCUIT AND TEST METHOD THEREOF	

APPLICATION ELEMENTS	
See MPEP chapter 600 concerning utility patent application contents.	

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 15]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C.113) [Total Sheets 2]
5. Oath or Declaration [Total Pages 3]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:	
Commissioner for Patents Box Patent Application P.O. Box 1450 Alexandria, VA 22313-1450	

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS	
9. <input checked="" type="checkbox"/>	Assignment Papers (cover sheet & document(s))
10. <input type="checkbox"/>	37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)
11. <input type="checkbox"/>	English Translation Document (if applicable)
12. <input checked="" type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/>	Preliminary Amendment
14. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. <input checked="" type="checkbox"/>	Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. <input type="checkbox"/>	Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. <input type="checkbox"/>	Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____
Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	30593 30593 (Insert Customer No. or Attach bar code label here)	or <input type="checkbox"/> Correspondence address below
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Name	Harness, Dickey & Pierce, P.L.C.				
Address	P.O. Box 8910				
City	Reston	State	VA	Zip Code	20195
Country	United States of America	Telephone	703-668-8000	Fax	703-668-8200

Name (Print/Type)	John A. Castellano	Registration No. (Attorney/Agent)	35,094
Signature			Date
			November 25, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

16235 U.S. PTO
10/7/20123

112503

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

112503
13281 U.S. PTO

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 900.00)

Complete If Known	
Application Number	NEW
Filing Date	November 25, 2003
Inventor(s)	Ho-Jin LEE
Examiner Name	UNASSIGNED
Group / Art Unit	UNASSIGNED

Attorney Docket No. 2557-000191/US

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number	08-0750
Deposit Account Name	Harness, Dickey & Pierce, P.L.C.
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	

2. Payment Enclosed:
 Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	770
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$770)

2. EXTRA CLAIM FEES

Total Claims	-20 **	=	5	X	18	=	90	Extra Claims	Fee from below	Fee Paid
Independent Claims	3	-3 **	=	0	X	86	=	0		
Multiple Dependent					X		=	0		

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid ** Reissue independent claims over original patent
1204 86	2204 43	** Reissue claims in excess of 20 and over original patent
1205 18	2205 9	
SUBTOTAL (2)		

**or number previously paid, if greater. For Reissues, see above

3. ADDITIONAL FEES	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath		
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet		
1053 1053	1053 130	Non-English specification		
1812 2,520	1812 2,520	For filing a request for reexamination		
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action		
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action		
1251 110	2251 55	Extension for reply within first month		
1252 420	2252 210	Extension for reply within second month		
1253 950	2253 475	Extension for reply within third month		
1254 1,480	2254 740	Extension for reply within fourth month		
1255 2,010	2255 1,005	Extension for reply within fifth month		
1401 330	2401 165	Notice of Appeal		
1402 330	2402 165	Filing a brief in support of an appeal		
1403 290	2403 145	Request for oral hearing		
1451 1,510	1451 1,510	Petition to institute a public use proceeding		
1452 110	2452 55	Petition to revive – unavoidable		
1453 1,330	2453 665	Petition to revive – unintentional		
1501 1,330	2501 665	Utility issue fee (or reissue)		
1502 480	2502 240	Design issue fee		
1503 640	2503 320	Plant issue fee		
1460 130	1460 130	Petitions to the Commissioner		
1807 50	1807 50	Processing fee under 37 CFR 1.17 (q)		
1806 180	1806 180	Submission of Information Disclosure Stmt		
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	40	
1809 770	2809 385	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810 770	2810 385	For each additional invention to be examined (37 CFR § 1.129(b))		
1801 770	2801 385	Request for Continued Examination (RCE)		
1802 900	1802 900	Request for expedited examination of a design application		
Other fee (specify) _____				
*Reduced by Basic Filing Fee Paid				
SUBTOTAL (3) (\$ 40)				

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	John A. Castellano	Registration No. Attorney/Agent)	35,094	Telephone 703-668-8000
Signature			Date	November 25, 2003

WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038.

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